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STATEMENT OF

RECEIVED

FORM 1	ORGANIZATION	2013 NOV -6 AM 7:29
NAME OF COMMITTEE (in	(Check if name Example:If typing, type is changed) over the lines.	12FE4M5
Friends o	f Jim Evans	
ADDRESS (number a	6271 S Farm Road 67	
(Check if a is changed)		MO 65738
	CITY	STATE ZIP CODE
COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) [imevansforcongress@gmail.com		nail.com
is change	d)	
(Check if is change		
3. FEC IDENTIFIC	CATION NUMBER	
4. IS THIS STATE	MENT X NEW (N) OR	
I certify that I have of Type or Print Name	examined this Statement and to the best of my knowledge and belied of Treasurer Dr. Shirley Huffman	of it is true, correct and complete.
Signature of Treasure	Q Slightle	Date 10 / 25 / 2013
NOTE: Submission of	false, erroneous, or incomplete information may subject the person signir ANY CHANGE IN INFORMATION SHOULD BE REPORTED	•
Office Use	For further information Federal Election Comm Toll Free 800-424-9530	nission FEC FURIWI I